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SMD Operations Procedures Manual

2.2 OPERATION OF THE ESH&Q OFFICE FOR SUPERCONDUCTING MAGNET DIVISION

Text Pages 1 through 6

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Preparer(s): M. Gaffney
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2.2 Operation the ESH&Q Office for Superconducting Magnet Division

1.0 Purpose and Scope

- 1.1 The purpose of this procedure is to define the roles, responsibilities, accountabilities and authorities for the conduct of the Environmental, Safety, Health and Quality (ESH&Q) Office for the Superconducting Magnet Division (SMD).

2.0 Responsibilities

- 2.1 The SMD Division Head has overall responsibility for the ESH&Q Program and for designating an ES&H Coordinator and assigning qualified personnel as ESH&Q Office members.
- 2.2 The SMD ES&H Coordinator is responsible ensure ESH&Q Office functions are performed and to inform the SMD Division Head of any significant issues that involve the safety, health of personnel or could lead to an adverse environmental impact from SMD facilities.
- 2.3 ESH&Q Office Members has the responsibility of performing the tasks as described in the Procedure and to be current in associated references.

3.0 Prerequisites

None

4.0 Precaution

None

5.0 Procedure

5.1 ESH&Q Office

- 5.1.1 The Superconducting Magnet Division ESH&Q Office has been designated by the Division Head and is responsible for:
- a. Developing the Project ESH&Q Program in accordance with Laboratory ES&H Policy and Standards Based Management Systems (SBMS) requirements.
 - b. Ensuring compliance with local, State and Federal environmental regulations.
 - c. Conducting necessary ES&H reviews within the Project/Division.
 - d. Assisting in preparation of documentation and participating in

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- necessary ES&H reviews by the Laboratory ES&H Committee and the Cryogenic Safety Committee.
- e. Reviewing the applicability of ES&H and environmental related SBMS documents to Division operations and communicating those requirements to appropriate managers.
 - f. Ensuring that Environmental Management Systems (EMS) requirements are established, implemented and maintained in accordance with ISO 14001 and the Laboratory requirements for EMS.
 - g. Identifying environmental aspects of Division activities, products and services, and determining those that can have significant impact.
 - h. Reviewing the Environmental Management Program (EMP) forms and environmental aspects on an annual basis, at a minimum, and when changes in operations or legal requirements occur.
 - i. Establishing EMS compliance by the review of Process Assessment Forms (PAF), Operational Control Forms (OCF) (annual or when operational or legal requirements are changed) and the performance of Tier I inspections.
 - j. Ensuring the following (as a minimum) safety and environmental records are maintained and controlled:
 - [Division EMS Program Description](#)
 - [Division Self Assessment Plan](#)
 - [Environmental Aspects Matrix](#)
 - [Summary of Significant Aspects](#)
 - [EMP forms](#)
 - [OCF](#)
 - [PAF](#)
 - Training (as related to safety and the environment)
 - Tier I inspection records
 - 90-Day Area Inspection Reports
 - Air permits and Logbooks (for permitted air emission sources)
 - Nonconformance Reports (safety and environment related)
 - EMP Phase II Database
 - k. Coordinating [environmental assessments](#).
 - l. Ensure procedures/documents are reviewed and revised as needed after the occurrence of an accident or emergency situation and implement and record any changes in documented procedures resulting from corrective and preventive actions.
 - m. Reporting on the performance of the EMS to senior management for review and as a basis for improvement:

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- Effluent and emission monitoring data
- Progress in achieving environmental objectives and performance measures.
- Nonconformances and/or occurrences.
- Internal assessment and external audit results.
- Community/stakeholder concerns.

5.1.2 The following positions are designated by the Division Head as members of the Superconducting Magnet Division ES&H Office (the names and contact numbers are listed on the Contact List on the division's ESH & QA web page):

- ESH Coordinator (Chairperson)
- Quality Assurance Representative
- Environmental Compliance Representative
- Facility Support Representative

5.2 Engineering and Work Controls

5.2.2 The ES&H Coordinator will review all Work Control Permits classified with either a moderate or high level of risk prior to commencement of work. Permits classified with a low risk levels will be review periodically by the ES&H Coordinator to determine if risk assessments are adequate.

5.2.2 The ES&H Coordinator will review design drawings, Engineering Change Requests (ECR), Deviations and Waivers and procedures to determine if ES&H and environmental aspects have been adequately addressed or if further review is required.

5.2.3 The ES&H Coordinator will ensure all pressure or load tests required by applicable code, regulations or policies are witnessed by qualified personnel.

5.3 Tier I Inspection Committee

5.3.1 The Division Head appoints the Tier I Inspection Committee. The following positions are designated (the names and contact numbers are listed on the Contact List on the division's ESH & QA web page or Organizational Chart*):

- ESH Coordinator (Chairperson)
- Quality Assurance Representative

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- Environmental Compliance Representative
- Facility Support Representative
- Building Manager (as applicable)
- Technical Support Supervisor*

5.3.2 This Committee shall:

- a. Perform [Tier I inspections](#).
- b. Perform Regulatory Compliance Assessments in conjunction with scheduled Tier I inspections using [Regulatory Compliance Assurance Self-Assessment Guidance Cards](#) when applicable.
- c. Review ES&H inspection reports and the status of corrective actions.
- d. Publish a [Tier I Inspection schedule](#) for Divisional spaces annually.
- e. The Chair of the Committee shall prepare recommendations from the inspections and distribute them to Committee Members, the Division Head and the responsible first line supervisor within two (2) weeks of the date of the meeting or inspection.
- f. Transfer all inspection findings that significantly impact the environment to the Non-Conformance Database

5.4 90-Day Area Management

- 5.4.1 The Building Manager for Building 902 and 905 will be responsible for the maintenance and upkeep of the division's 90-Day Area, located in Building 905, and the Satellite Accumulation Area located adjacent to the 90-Day Area.
- 5.4.2 The Building Manager, or the Deputy Building Manager will perform and document the weekly inspections of the 90-Day Area. The ES&H Coordinator (in lieu of the Building Manager) will perform these weekly inspections periodically.
- 5.4.3 The ES&H Coordinator will post the latest three months of inspection reports just outside the 90-Day Area. The ES&H Coordinator will file the remainder of the current year's reports.

5.5 Division's Radiation Generation Device (RGD) Custodian

- 5.5.1 The division's ES&H Coordinator is assigned as the division's RGD Custodian, responsible for the following as required by the Laboratory's RGD program:

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- a. Classify and register the RGD with the Laboratory's Master RGD Custodian using the proper registration form.
- b. Ensure that the appropriate design reviews of devices, projects and work controls have been completed and approved for RGDs.
- c. Ensure that applicable documentation (i.e., drawings, schematics, logbooks, safety device specifications and diagrams, manufacturer's instruction manuals, maintenance history records) are maintained during the life of the RGD.
- d. Schedule and verify that routine inspections and tests of the RGD interlocks, warning lights and other safety features are performed and documented.
- e. Schedule radiation surveys of RGDs with the Facility Support Representative
- f. Ensure that a RGD is operated only when the radiological survey stickers are valid.
- g. Notify the Facility Support Representative of any change that could affect the radiation exposure to an individual.
- h. Notify the Master RGD Custodian of any change in the status of the device (modified, transferred to another owner or location, declared inactive or reactivated, missing, or when the RGD is to be disposed of).
- i. Notify the Facility Support Representative before any RGD is brought on-site, regardless of primary ownership.
- j. Ensure that out-of-service RGDs containing radioactive sources are properly tagged.

6.0 Documentation

- 6.1 ES&H Coordinator will maintain a record of findings from the Tier I inspection
- 6.2 ES&H Coordinator or the Quality Assurance Representative will enter into the Non-Conformance DataBase any finding, either from a Tier I inspection, or individually reported which could have a significant negative impact to the environment.
- 6.3 ES&H Coordinator will approve divisional EMS documentation.
- 6.4 ES&H Coordinator will ensure notification to affected personnel of changes/revisions to safety or EMS related documents.
- 6.5 Division Secretary will maintain a copy of significant correspondences, meeting minutes and reports which impacts the safety, health or environment to SMD personnel, guests or facilities.
- 6.6 ES&H Coordinator (RGD Custodian) will maintain a list of registered RGD in the division.

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7.0 References

- 7.1 BNL ES&H Standard 1.2.0, “[Departmental Environment, Safety & Health Inspections](#)”.
- 7.2 BNL SBMS Environmental Assessment Subject Area Exhibit: [Regulatory Compliance Assurance Self-Assessment Guidance Cards](#)

8.0 Attachments

None